

OPERATIONAL MEMO

TITLE:	MEDICAL ASSISTANCE RETURNED MAIL PROCESS
SUPERSEDES NUMBER:	AGENCY LETTER HCPF 18-007
EFFECTIVE DATE:	OCTOBER 1, 2019
DIVISION AND OFFICE:	MEDICAID OPERATIONS OFFICE
PROGRAM AREA:	ELIGIBILITY POLICY
KEY WORDS:	RETURNED MAIL, MAIL

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Purpose and Audience:

The purpose of this memo is to advise eligibility sites of changes to the returned mail process. This will replace the medical assistance process detailed in the Agency Letter HCPF 18-007 'Medical Assistance Returned Mail Process', released by the Department on April 13, 2018.

Information: Based on findings from a work group of counties and state agencies, on April 23, 2015, the following recommendation for processing returned mail from CBMS was provided and made available through the Staff Development Center.

April 2015 CBMS Returned Mail Process, Version 1.0:

After three pieces of mail have been returned, contact the client via any other means possible to ensure the correct current information is on file prior to making changes to the case (for example, calling the client at the phone number on file) and ensuring detailed case comments are entered indicating the steps that were taken and what actions were taken on the case.

Counties have provided feedback that this process is unmanageable with the quantity of returned mail received. For that reason, on February 9, 2017, a new work group of counties, and the Colorado Departments of Human Services and Health Care Policy and Financing, was established to address the workload issues counties face regarding returned mail. In addition, the Department has reviewed federal guidance to identify flexibility for minimizing the workload associated to return mail.

Information/Procedure:

Beginning immediately, eligibility sites must adopt procedures in accordance with the following requirements.

The returned mail process has been revised for action to be taken on a case after the first piece of returned mail. This supersedes the previous process of waiting for three pieces of mail before action is taken. Cases must be updated to insure members receive important documentation without delays (verifications checklists, redeterminations, etc.).

Following are specific return mail scenarios and actions to be taken with each scenario:

- 1) Returned mail that is un-forwardable (post office sticker indicating no forwarding address, no post office sticker, or return to sender sticker):
 - a) Attempt to reach the member receiving Medical Assistance through the contact method(s) provided by the member.
 - i) If you can reach the member, update the case appropriately with the new address.
 - (1) The current residency of the member must also be verified. An individual may have an out of state address but be considered a Colorado resident if they intend to return to Colorado.
 - (a) If an individual is no longer a Colorado resident, update the residency status. The address and residency change will close the case per current system logic.
 - (b) If an individual indicates they intend to return to Colorado, they will meet the Colorado residency requirement and may remain eligible regardless of the out of state address.
 - (c) Ask the member if they are receiving Medical Assistance in the other state. Update the Prior Aid screen with the coverage dates reported by the member. Per current system logic, the case will close for receiving assistance in another state.
 - ii) If you are unable to reach the member, document the date, time, and means you took to contact the member, update the whereabouts unknown field to yes and enter the effective begin date.
 - (1) Per current system logic, this will close the case.
 - b) Retain the envelope (according to the eligibility site's established business process for file retention) indicating no forwarding address, and enough of the document to correctly identify the case, date sent, and document sent. This will be used for auditing purposes.

- c) If the whereabouts of the member become known while the member is still eligible for services, the case must be reopened (per current best practice). Otherwise a new application is required.
- d) Record all actions taken within case comments.

Supporting Authority: 42 C.F.R. §§ 435.914(b)(3), 435.916(d), 431.213(d), 431.17(b)(1)(v).

2) Returned mail with in-state forwarding address:

- a) Update the case with the new address.
- b) Retain the envelope (according to eligibility site's established business process for file retention) indicating the forwarding address and enough of the document to correctly identify the case, date sent, and document sent. This will be used for auditing purposes.
- c) If applicable, send the returned piece of mail to the new address.
- d) Record the change in case comments.

3) Returned mail with out-of-state forwarding address:

- a) Attempt to reach the member receiving Medical Assistance through the contact method provided by the member.
 - i) If you can reach the member, update the case appropriately with the new address.
 - (1) The current residency of the member must also be verified. An individual may have an out of state address but be considered a Colorado resident if they intend to return to Colorado.
 - (a) If an individual is no longer a Colorado resident, update the residency status. The address and residency change will close the case per current system logic.
 - (b) If an individual indicates they intend to return to Colorado, they will meet the Colorado residency requirement and may remain eligible regardless of the out of state address.
 - (c) Ask the member if they are receiving Medical Assistance in the other state. Update the Prior Aid screen with the coverage dates reported by the member. Per current system logic, the case will close for receiving assistance in another state.
 - ii) If you are unable to reach the member, document the date, time, and means you took to contact the member, and update the case appropriately.

- (1) The returned mail and failure to contact the member will be considered as whereabouts unknown for the member. Update the whereabouts unknown field to yes and enter the effective begin date.
 - (a) Per current system logic, this will close the case.
- b) Retain the envelope (according to eligibility site's established business process for file retention) indicating the forwarding address and enough of the document to correctly identify the case, date sent, and document sent. This will be used for auditing purposes.
- c) Record all actions taken within case comments.

Supporting Authority: 42 C.F.R. §§ 435.916(d), 431.17(b)(1)(v), §435.403(a).

Special Populations

Below are special populations that will require additional steps when reviewing the case for returned mail.

<u>Long Term Care cases</u>: Prior to closing a case due to returned mail, please reach out to the case management agency to ensure the member has not moved to a new facility. Document in case comments all actions taken when contacting the case management agency. Take action, based on the situation, as outlined above and document in case comments accordingly.

<u>Former Foster Care:</u> Qualifying former foster care youth from Colorado have guaranteed Health First Colorado (Colorado's Medicaid Program) coverage up until the age of 26. Health First Colorado extends medical assistance to age 26 for former foster care youth that were in Colorado foster care at ages 18, 19, 20 or 21 and enrolled in Health First Colorado. This is done automatically. When reviewing the case for returned mail, if the case is Former Foster Care, follow the steps outlined for updating the address in this memo if one is provided but only close a case if it has been verified they are no longer a Colorado resident. Document actions taken in case comments. For more information regarding Former Foster Care click <u>here</u>.

<u>Homeless:</u> Individuals applying and/or receiving Medical Assistance are not required to have a fixed address to receive Medicaid as long as they declare they are a Colorado resident. Eligibility sites should continue to follow their established business process' to assist these individuals receive their mail and continue benefits if all other eligibility criteria is met.

<u>SSI Mandatory</u>: For cases that have SSI Mandatory individuals, the eligibility site shall forward or contact the local Social Security office to provide the updated information.

This will allow the SSA interface to take action on the case once the local Social Security office updates their system.

<u>Address Confidentiality Program</u>: For cases that are ACP participants, eligibility sites are required to accept the ACP Authorization Card as the applicant's legal address. This address should replace all addresses that are currently being used in all existing and new files and systems. Eligibility sites may contact the ACP to verify current program enrollment.

ACP <u>acp@state.co.us</u> (303) 866-2208

Attachment(s):

None

Department Contact:

Medicaid.Eligibility@state.co.us